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EXAMINER	
DUONG, OANH L	

ART UNIT	PAPER NUMBER
2155	

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Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary	Application No.	Applicant(s)	
	10/611,486	CLINTON ET AL.	
	Examiner	Art Unit	
	Oanh Duong	2155	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 03 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1)☒ Responsive to communication(s) filed on *01 July 2003*.

2a)☐ This action is **FINAL**. 2b)☒ This action is non-final.

3)☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4)☒ Claim(s) *1-44* is/are pending in the application.

4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5)☐ Claim(s) _____ is/are allowed.

6)☒ Claim(s) *1-44* is/are rejected.

7)☐ Claim(s) _____ is/are objected to.

8)☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9)☐ The specification is objected to by the Examiner.

10)☒ The drawing(s) filed on *01 July 2003* is/are: a)☒ accepted or b)☐ objected to by the Examiner.

Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11)☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12)☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

a)☐ All b)☐ Some * c)☐ None of:

1.☐ Certified copies of the priority documents have been received.

2.☐ Certified copies of the priority documents have been received in Application No. _____.

3.☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) ☒ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08) Paper No(s)/Mail Date *07/01/2003*.
4) ☐ Interview Summary (PTO-413) Paper No(s)/Mail Date. _____.
5) ☐ Notice of Informal Patent Application (PTO-152)
6) ☐ Other: _____.

DETAILED ACTION

1. Claims 1-44 are presented for examination.

Claim Rejections - 35 USC § 112

2. The following is a quotation of the second paragraph of 35 U.S.C. 112:

> The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter which the applicant regards as his invention.

3. Claim 1, 16, and 27 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

Claim 1 recites the limitation "the health" in line 1. There is insufficient antecedent basis for this limitation in the claim.

Claim 16 recites the limitation "the health" in line 1. There is insufficient antecedent basis for this limitation in the claim.

Claim 27 recites the limitation "the health" in line 1. There is insufficient antecedent basis for this limitation in the claim.

Appropriate correction is required.

Claim Rejections - 35 USC § 101

4. 35 U.S.C. 101 reads as follows:

> Whoever invents or discovers any new and useful process, machine, manufacture, or composition of matter, or any new and useful improvement thereof, may obtain a patent therefor, subject to the conditions and requirements of this title.

5. Claims 27-37 are rejected under 35 U.S.C. 101 because the claimed invention is directed to non-statutory subject matter.

Claims 27-37 are not limited to tangible embodiments. The claim recited, "A computer readable medium including..." is nonstatutory. Since in view of Applicant's disclosure in page 7 lines 12-26, the computer readable medium also includes "communication media embodies...data in modulated data signal such a carrier wave". A signal, a form of energy, does not fall within either of the two definitions of manufacture. Thus a signal does not fall within one of the four statutory classes of §101. As such, the claim is not limited to statutory subject matter and is therefore nonstatutory.

To overcome this type of 101 rejection, examiner suggests applicants to amend the claim to include computer readable storage medium including computer-executable instructions (for example, the claim should be amended as "A computer-readable storage medium including...:" see MPEP 2106 section V. DETERMINE WHETHER THE CLAIMED INVENTION COMPLIES WITH 35 U.S.C. 101 under subsection 1. Nonstatutory subject matter.

Claim Rejections - 35 USC § 103

6. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the

invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

7. Claims 1-7, 9-10, 12-13, 16-22, 24, 27-33, 35, 38-41, and 43 are rejected under 35 U.S.C. 103(a) as being unpatentable over **Tindal** et al. (hereafter, Tindal), U.S. Pub. No. 2002/0069271 A1, in view of **Jahn**, U.S. Pub. No. **2004/0019803** A1.

Regarding claim 1, **Tindal** teaches a system for administering the health of a network device (i.e., monitor the overall health of individual network devices 135, Fig. 2 page 4 paragraph [0039]) comprising:

a provider subsystem (i.e., network manager unit 140, Fig. 2) for providing services relating to network device health status, wherein the services include acquiring health status information (i.e., *network manager 140 includes a health manager actively polls at least some of the network devices about their status*, page 4 paragraph [0039]);

a health engine subsystem (i.e., Health Manager 108,Fig. 3) for processing the health status information acquired by the provider subsystem and rendering health status notifications (i.e., *health manager 180 can collect individual device information and publish message regarding network device problems*, page 4 paragraph [0039]).

Tindal does not explicitly teach network device is a personal computer, and a client user interface subsystem for reporting personal computer health status to a user in accordance with the health status notifications.

Jahn teaches a software facility for reporting security vulnerabilities on a computer network (see abstract). Jahn teaches network device is a personal computer (i.e., personal computer, page 3 paragraph [0050]), and a client user interface

subsystem (i.e., web based health metrics reporter, Figs 2 and 4) for reporting personal computer health status to a user in accordance with the health status notifications (i.e., *scanning the nodes, which include personal computer(s), of a network for vulnerabilities such as open or accessible ports, crackable passwords and flawed firewalls. This scanning and its results are displayed in an interactive interface and reported in reports,* page 2 paragraph [0037] and page 3 paragraphs [0047]-[0057]).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate the client user interface subsystem for reporting personal health status to a user as taught by **Jahn** in the system of administration the health of a network device in **Tindal**. One would be motivated to do so to allow the ability to remediate vulnerabilities to be facilitated by assisting system support areas with the ability to quickly find and identify their areas of concern (**Jahn**, page 3 paragraph [0031] lines 1-3).

Regarding claim 2, **Tindal** teaches the system of claim 1 further comprising a provider interface for passing an instruction for corrective action from the health engine subsystem to a consumer of corrective actions (i.e., *determine the appropriate course of action to take for the particular message and the action manager can implement that response*, page 4 paragraph [0039]).

Regarding claim 3, **Tindal** teaches the system of claim 2 wherein the consumer (i.e., action manager 185, Fig. 3) of corrective actions is a provider service within the

provider subsystem (i.e., *health manager 180 can publish messages regarding network device problems. The policy manager 170 can then determine the appropriate course of action to take for the particular message, and the action manager 185 can implement that response*, 4 paragraphs [0035] and [0039]).

Regarding claim 4, **Tindal** teaches the system of claim 2 wherein the health engine subsystem (health manager 180, Fig. 3) comprises task execution coordination logic for enforcing mutual exclusion rules regarding execution of tasks by the consumer of corrective actions (i.e., *health manager 180 can publish messages regarding network device problems. The policy manager 170 can then determine the appropriate course of action to take for the particular message, and the action manager 185 can implement that response*, 4 paragraphs [0035] and [0039]).

Regarding claim 5, **Tindal** teaches the system of claim 2 wherein the health engine subsystem comprises rules logic for specifying the instruction for corrective action (page 4 paragraphs [0035] and [0039]).

Regarding claim 6, **Tindal** teaches the system of claim 5 wherein the health engine subsystem specifies the instruction for corrective action automatically based upon the rules logic (page 4 paragraphs [0035] and [0039]).

Regarding claim 7, **Tindal** teaches the system of claim 5 wherein the rules logic specifies an action based upon health status information originating from multiple providers (i.e., network devices 125) within the provider subsystem (page 4 paragraph [0035] and [0039]).

Regarding claim 9, **Tindal** teaches the system of claim 1 wherein the health engine subsystem comprises a health status information store for maintaining records corresponding to the health status information (page 4 paragraphs [0042]-[0043] and page 5 paragraph [0050]).

Regarding claim 10, **Tindal** teaches the system of claim 1.

Tindal does not explicitly teach the provider subsystem includes a security health status provider module.

Jahn teaches the provider subsystem includes a security health status provider module (i.e., security health metrics reporter, Fig. 4, page 4 paragraph [0056]).

Regarding claim 12, Tindal teaches the system of claim 1.

Tindal does not teach the provider subsystem includes a backup health status provider module.

Jahn teaches the provider subsystem includes a backup health status provider module (page 4 paragraph [0069]).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate the backup module as taught by Jahn into the system of Tindal because such backup module would allow data backup and restoring incase of a system crash or mistake (Jahn, page 4 paragraph [0069], lines 3-4).

Regarding claim 13, Tindal teaches the system of claim 1.

Tindal does not explicitly teach the provider subsystem includes a performance provider module.

Jahn teaches he provider subsystem includes a performance provider module (i.e., vulnerability tutorials, page 3 paragraph [0060].

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate the performance provider module as taught by Jahn into the teachings of Tindal because such a performance provider module would provide support staff valuable formation needed to understand, obtain program patches, and remediate the problems quickly and correctly (Jahn, page 3 paragraph [0060] lines 5-7).

Regarding claim 16, **Tindal** teaches a method for administering the health of a network device (i.e., monitor the overall health of individual network devices 135, Fig. 2 page 4 paragraph [0039]) comprising the steps of:

providing, by a provider subsystem (i.e., network manager unit 140, Fig. 2) services relating to network device health status, wherein the services include acquiring

health status information (i.e., network manager 140 includes a health manager actively polls at least some of the network devices about their status, page 4 paragraph [0039]);

processing, by a health engine subsystem (i.e., Health Manager 108,Fig. 3), the health status information acquired by the provider subsystem and rendering health status notifications (i.e., health manager 180 can collect individual device information and publish message regarding network device problems, page 4 paragraph [0039]).

Tindal does not explicitly teach network device is a personal computer, and reporting, by a client user interface subsystem, personal computer health status to a user in accordance with the health status notifications.

Jahn teaches a software facility for reporting security vulnerabilities on a computer network (see abstract). Jahn teaches network device is a personal computer (i.e., personal computer, page 3 paragraph [0050]), and reporting, by a client user interface subsystem (i.e., web based health metrics reporter, Figs 2 and 4) personal computer health status to a user in accordance with the health status notifications (i.e., *scanning the nodes, which include personal computer(s), of a network for vulnerabilities such as open or accessible ports, crackable passwords and flawed firewalls. This scanning and its results are displayed in an interactive interface and reported in reports,* page 2 paragraph [0037] and page 3 paragraphs [0047]-[0057]).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate the step of reporting, by the client user interface subsystem personal health status to a user as taught by **Jahn** in the system of administration the health of a network device in **Tindal**. One would be motivated to do

so to allow the ability to remediate vulnerabilities to be facilitated by assisting system support areas with the ability to quickly find and identify their areas of concern (**Jahn**, page 3 paragraph [0031] lines 1-3).

Regarding claim 17, **Tindal** teaches the method of claim 16 further comprising the step of: passing, by a provider interface, an instruction for corrective action from the health engine subsystem to a consumer of corrective actions (i.e., *determine the appropriate course of action to take for the particular message and the action manager can implement that response*, page 4 paragraph [0039]).

Regarding claim 18, **Tindal** teaches method of claim 17 wherein the consumer of corrective actions is a provider service within the provider subsystem (i.e., *health manager 180 can publish messages regarding network device problems. The policy manager 170 can then determine the appropriate course of action to take for the particular message, and the action manager 185 can implement that response*, 4 paragraphs [0035] and [0039]).

Regarding claim 19, **Tindal** teaches the method of claim 17 further comprising the step of: enforcing, by task execution coordination logic, mutual exclusion rules regarding execution of tasks by the consumer of corrective actions (i.e., *health manager 180 can publish messages regarding network device problems. The policy manager 170 can then determine the appropriate course of action to take for the*

particular message, and the action manager 185 can implement that response, 4 paragraphs [0035] and [0039]).

Regarding claim 20, **Tindal** teaches the method of claim 17 further comprising the step of: specifying, by rules logic, the instruction for corrective action (page 4 paragraphs [0035] and [0039]).

Regarding claim 21, **Tindal** teaches the method of claim 20 wherein the specifying step is performed automatically based upon the rules logic (page 4 paragraphs [0035] and [0039]).

Regarding claim 22, **Tindal** teaches the method of claim 20 wherein the specifying step is performed based upon health status information originating from multiple providers within the provider subsystem (i.e., network devices 125) within the provider subsystem (page 4 paragraph [0035] and [0039]).

Regarding claim 24, **Tindal** teaches the method of claim 16 further comprising the step of: maintaining, by a health status information store of the health engine subsystem, records corresponding to the health status information page 4 paragraphs [0042]-[0043] and page 5 paragraph [0050]).

Regarding claim 27, this claim is the computer-readable medium including

computer-executable instructions for administering the health of a personal computer, the computer-executable instructions facilitating performing the corresponding method of claim 16, discussed above, same rationale of rejection is applicable.

Regarding claim 28, this claim comprises the computer-readable medium of comprising computer-executable instructions and is substantially the same as method of claim 17, same rationale of rejection is applicable.

Regarding claim 29, this claim comprises computer-readable medium and is substantially the same as method of claim 18, same rationale of rejection is applicable.

Regarding claim 30, this claim comprises the computer-readable medium corresponding to the method claim 19, same rationale of rejection is applicable.

Regarding claim 31, this claim comprises the computer-readable medium corresponding to the method claim 20, same rationale of rejection is applicable.

Regarding claim 32, this claim comprises the computer-readable medium corresponding to the method claim 21, same rationale of rejection is applicable.

Regarding claim 33, this claim comprises the computer-readable medium corresponding to the method claim 22, same rationale of rejection is applicable.

Regarding claim 35, this claim comprises the computer-readable medium corresponding to the method claim 24, same rationale of rejection is applicable.

Regarding claim 38, this claim is the system comprising means for performing the corresponding method claim 16, discussed above, same rationale of rejection is applicable.

Regarding claim 39, this claim is the system comprising means for performing the corresponding method claim 17, discussed above, same rationale of rejection is applicable.

Regarding claim 40, this claim is the system comprising means for performing the corresponding method claim 18, discussed above, same rationale of rejection is applicable.

Regarding claim 41, this claim is the system comprising means for performing the corresponding method claim 19, discussed above, same rationale of rejection is applicable.

Regarding claim 43, this claim is the system comprising means for performing the corresponding method claim 24, discussed above, same rationale of rejection is applicable.

8. Claims 8, 14, 23, 25, 34, 36, 42, and 44 are rejected under 35 U.S.C. 103(a) as being unpatentable over **Tindal,** in view of **Jahn,** and further in view of **Fabrizi** et al. (hereafter, Fabrizi), U.S. Pub. No. **2004/0153748** A1.

Regarding claim 8, **Tindal** teaches the system of claim 1.

the combination of teachings of **Tindal and Jahn** does not explicitly teaches a client interface for receiving a request for corrective action from the client user interface subsystem.

Fabrizi teaches configuration data processing system wherein some of the identified actions are automatically implemented (see abstract). **Fabrizi** teaches client interface (i.e. GUI 313, Fig. 3) for receiving a request for corrective action from the client user interface subsystem (pages 9-10 paragraph 82).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate the client interface for receiving a request for corrective action from the client user interface system as taught by **Fabrizi** into the combination of teachings of **Tindal and Jahn**. One would be motivated to do so to reduce errors in the process of defining high availability data processing environment for an existing data processing system (**Fabrizi**, page 1 paragraph [0008]).

Regarding claim 14, **Tindal** teaches the system of claim 1.

Tindal does not explicitly teach the client user interface subsystem supports a user interface providing a health status score and a user selectable corrective action returned to the health engine subsystem.

Jahn teaches the client user interface subsystem supports a user interface providing a health status score (Fig. 5 page 3 paragraph [0057]).

Fabrizi teaches a user selectable corrective action returned to the subsystem (pages 9-10 paragraph 82).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate a user selectable corrective action returned to the subsystem as taught by **Fabrizi** into the combination of teachings of **Tindal and Jahn**. One would be motivated to do so to reduce errors in the process of defining high availability data processing environment for an existing data processing system (Fabrizi, page 1 paragraph [0008]).

Regarding claim 23, **Tindal** teaches the method of claim 16.

the combination of teachings of **Tindal and Jahn** does not explicitly teaches receiving, by a client interface a request for corrective action from the client user interface subsystem.

Fabrizi teaches configuration data processing system wherein some of the identified actions are automatically implemented (see abstract). **Fabrizi** teaches

receiving, by client interface (i.e. GUI 313, Fig. 3) a request for corrective action from the client user interface subsystem (pages 9-10 paragraph 82).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate the step of receiving a request for corrective action from the client user interface system as taught by **Fabrizi** into the combination of teachings of **Tindal and Jahn**. One would be motivated to do so to reduce errors in the process of defining high availability data processing environment for an existing data processing system (**Fabrizi**, page 1 paragraph [0008]).

Regarding claim 25, **Tindal** teaches the method of claim 16.

Tindal does not explicitly teach providing a health status score and a user selectable corrective action returned to the health engine subsystem.

Jahn teaches providing, by a user interface of the client user interface subsystem, a health status score (Fig. 5 page 3 paragraph [0057]).

Fabrizi teaches a user selectable corrective action returned to the subsystem (pages 9-10 paragraph 82).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate a user selectable corrective action returned to the subsystem as taught by **Fabrizi** into the combination of teachings of **Tindal and Jahn**. One would be motivated to do so to reduce errors in the process of defining high availability data processing environment for an existing data processing system (Fabrizi, page 1 paragraph [0008]).

Regarding claim 34, this claim comprises the computer-readable medium corresponding to the method claim 23, same rationale of rejection is applicable.

Regarding claim 36, this claim comprises the computer-readable medium corresponding to the method claim 25, same rationale of rejection is applicable.

Regarding claim 42, this claim is the system comprising means for performing the corresponding method claim 23, discussed above, same rationale of rejection is applicable.

Regarding claim 44, this claim is the system comprising means for performing the corresponding method claim 25, discussed above, same rationale of rejection is applicable.

9. Claims 11 are rejected under 35 U.S.C. 103(a) as being unpatentable over **Tindal**, in view of **Jahn**, and further in view of **Feng** et al. (hereafter, Feng), U.S. Pub. No. **2004/0083243** A1.

Regarding claim 11, **Tinda**l teaches the system of claim 1, wherein the provider subsystem includes health status provider module (i.e., Health manager 180, Fig. 3 page 4 paragraph [0039]).

The combination of Tindal and Jahn does not explicitly teach privacy service.

Feng teaches system and method wherein privacy is provided (see abstract). **Feng** teach privacy service (page 3 paragraphs [0056]-[0061]).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate the privacy service as taught by **Feng** in the combination of teachings of **Tindal and Jahn** because such privacy service would allow the user to control over his/her privacy relationship, thereby enhancing trust between service provider and users (**Feng,** page 1 paragraph [0013]).

10. Claims 15, 26, and 37 are rejected under 35 U.S.C. 103(a) as being unpatentable over **Tindal**, in view of **Jahn**, and further in view of **Mellquist** et al. (hereafter, Mellquist), U.S. Patent No. **7,002,921** B2.

Regarding claim 15, **Tindal** teaches the system of claim 1.

the combination of teachings of **Tindal and Jahn** does not explicitly teach an interface supporting an extensible set of providers within the provider subsystem.

Mellquist teaches a system wherein a sub page including active elements is provided such that when activated initiate a course of action to address the detection of the network problem (see abstract). **Mellquist** teaches an interface supporting an extensible set of providers within the provider subsystem (col. 6 lines 1-18).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate an interface supporting an extensible set of providers

within the provider subsystem as taught by **Mellquist** into the combination of teachings of **Tindal and Jahn**. One would be motivated to do so to allow network appliance/server to be added to the network without replacing or updating the network management system (**Mellquist**, col. 6 lines 16-18).

Regarding claim 26, **Tindal** teaches the method of claim 16.

the combination of teachings of **Tindal and Jahn** does not explicitly teach supporting, by an interface of the health engine subsystem, an extensible set of providers within the provider subsystem.

Mellquist teaches a system wherein a sub page including active elements is provided such that when activated initiate a course of action to address the detection of the network problem (see abstract). **Mellquist** teaches interface supporting an extensible set of providers within the provider subsystem (col. 6 lines 1-18).

It would have been obvious to one of ordinary skill in the art at the time of the invention was made to incorporate an interface supporting an extensible set of providers within the provider subsystem as taught by **Mellquist** into the combination of teachings of **Tindal and Jahn**. One would be motivated to do so to allow network appliance/server to be added to the network without replacing or updating the network management system (**Mellquist**, col. 6 lines 16-18).

Regarding claim 37, this claim comprises the computer-readable medium corresponding to the method claim 26, same rationale of rejection is applicable.

Conclusion

11. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

a) Collin et at., USPN 6,182,134, disclose management display includes a PC health icon representing operational status information for managed computer.

b) Greuel et al., U.S. Pub. No. 2002/0133584 A1, disclose calculating and displaying health of computer network.

c) Doyle et a., U.S. Pub. No. 2005/0044209 A1, discloses monitoring a managed system and recommending a course of action to performed in the managed system.

d) Knight et al., U.S. Pub. No. 2004/0199618 A1, disclose the corrective action aspect automatically receives the described problems from the monitor and analyze aspect and automatically takes corrective action to resolve at least some of the problems discovered by the monitor and analyze aspect.

f) Thornton, U.S. Pub. No. 2004/0158627 A1, discloses detecting conditions of computer components by a health computer, and if a condition is detected that meets a predetermined criterion, corrective of preparative actions may be taken.

g) Kaminsky et al., U.S. Pub. No. 2004/0117477 A1, disclose an alert can be generated and one or more corrective actions implemented to address the operational risk.

h) Chari et al., USPN 6,553,416, disclose monitoring alert and displaying details about recommended course of action.

i) Chase et al., U.S. Pub. No. 2004/0109410 A1, disclose identifying a corrective actions to avoid the overload condition based on the management policy.

k) Srivastava et al., U.S. Pub. No. 2003/0221002 A1, disclose initiating system health check.

12. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Oanh Duong whose telephone number is (571) 272-3983. The examiner can normally be reached on Monday- Friday, 2:00PM - 10:30PM.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Saleh Najjar can be reached on (571) 272-4006. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

Oanh Duong

O.D
March 20, 2006